



STUDIJŲ KOKYBĖS VERTINIMO CENTRAS

Šiaulių universiteto  
**STUDIJŲ PROGRAMOS SVEIKATOS EDUKOLOGIJA**  
*(valstybinis kodas – 612X20002)*  
**VERTINIMO IŠVADOS**

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**EVALUATION REPORT**  
**OF HEALTH EDUCATION** *(state code – 612X20002)*  
**STUDY PROGRAMME**  
at Siauliai University

**Expert team:**

1. **Dr Christiana Rosenberg-Ahlhaus (team leader)**, *academic*,
2. **Prof. Dr Francisco Carreiro da Costa**, *academic*,
3. **Dr Frances Murphy**, *academic*,
4. **Dr Dalia Lapėnienė**, *representative of social partners*,
5. **Ms Olga Stremauskaitė**, *student representative*.

**Evaluation coordinator -**

**Ms Barbora Drąsutytė**

Išvados parengtos anglų kalba  
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## DUOMENYS APIE ĮVERTINTĄ PROGRAMĄ

Studijų programos pavadinimas	<i>Sveikatos edukologija</i>
Valstybinis kodas	612X20002
Studijų sritis	socialiniai mokslai
Studijų kryptis	edukologija
Studijų programos rūšis	universitetinės
Studijų pakopa	pirmoji
Studijų forma (trukmė metais)	nuolatinė (4), iššęstinė (5)
Studijų programos apimtis kreditais	240
Suteikiamas laipsnis ir (ar) profesinė kvalifikacija	edukologijos bakalauras, pedagogas
Studijų programos įregistravimo data	2005 m. rugsėjo 1 d.

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## INFORMATION ON EVALUATED STUDY PROGRAMME

Title of the study programme	<i>Health Education</i>
State code	612X20002
Study area	Social Sciences
Study field	Education Studies
Type of the study programme	University studies
Study cycle	First cycle
Study mode (length in years)	Full-time (4), part-time (5)
Volume of the study programme in credits	240
Degree and (or) professional qualifications awarded	Bachelor in Education Studies, Teacher
Date of registration of the study programme	September 1, 2005

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The Centre for Quality Assessment in Higher Education

# CONTENTS

<b>I. INTRODUCTION .....</b>	<b>4</b>
1.1. Background of the evaluation process .....	4
1.2. General .....	4
1.3. Background of the HEI/Faculty/Study field/ Additional information .....	4
1.4. The Review Team.....	5
<b>II. PROGRAMME ANALYSIS.....</b>	<b>6</b>
2.1. Programme aims and learning outcomes.....	6
2.2. Curriculum design .....	8
2.3. Teaching staff.....	10
2.4. Facilities and learning resources .....	11
2.5. Study process and students' performance assessment .....	12
2.6. Programme management .....	14
<b>III. RECOMMENDATIONS .....</b>	<b>16</b>
<b>IV. SUMMARY .....</b>	<b>17</b>
<b>V. GENERAL ASSESSMENT .....</b>	<b>18</b>

## **I. INTRODUCTION**

### ***1.1. Background of the evaluation process***

The evaluation of on-going study programmes is based on the **Methodology for evaluation of Higher Education study programmes**, approved by Order No 1-01-162 of 20 December 2010 of the Director of the Centre for Quality Assessment in Higher Education (hereafter – SKVC).

The evaluation is intended to help higher education institutions to constantly improve their study programmes and to inform the public about the quality of studies.

The evaluation process consists of the main following stages: 1) *self-evaluation and self-evaluation report prepared by Higher Education Institution (hereafter – HEI)*; 2) *visit of the review team at the higher education institution*; 3) *production of the evaluation report by the review team and its publication*; 4) *follow-up activities*.

On the basis of external evaluation report of the study programme SKVC takes a decision to accredit the study programme either for 6 years or for 3 years. If programme evaluation is negative such a programme is not accredited.

The programme is **accredited for 6 years** if all evaluation areas are evaluated as “very good” (4 points) or “good” (3 points).

The programme is **accredited for 3 years** if none of the areas was evaluated as “unsatisfactory” (1 point) and at least one evaluation area was evaluated as “satisfactory” (2 points).

The programme **is not accredited** if at least one of evaluation areas was evaluated as "unsatisfactory" (1 point).

### ***1.2. General***

The Application documentation submitted by the HEI follows the outline recommended by the SKVC. Along with the self-evaluation report and annexes, the following additional documents have been provided by the HEI before, during and/or after the site-visit:

No.	Name of the document
1.	Final theses for years 2010-2014
2.	List of teachers providing the programme, indicating holders of doctoral degrees

### ***1.3. Background of the HEI/Faculty/Study field/ Additional information***

The first cycle programme of Health Education is implemented by the Department of Health Studies of the Faculty of Social Welfare and Disability Studies at Siauliai University in cooperation with other departments of the faculty (Special Education, Social pedagogy and

Psychology Studies), centres (Study Quality Centre; Disability Research Centre, combining Health Promotion and Consulting Services and Hippotherapy centres of the university, Public Health Research Centre) and academic staff of other departments of the structure of the university. A self-evaluation report of the study programme (hereafter SER) was provided to the review team to prepare for the site visit. To develop the SER a special team was assembled in 2014. The meetings of the group took place from February 2014 to November 2014. This report was prepared and structure according to the rules expressed in the Methodological Guidelines developed by SKVC. The SER was informative and detailed. Further clarification on qualifications of staff was provided during the visit.

The visit of the Review Team took place in an open and very cordial atmosphere where staff of the programme showed a willingness to engage in discussion and clarify aspects raised by the team. The visit was very informative for the team and helped them reach conclusions that informed the evaluation report.

#### **1.4. The Review Team**

The review team was assembled in accordance with the *Expert Selection Procedure*, approved by Order No 1-55 of 19 March 2007 of the Director of the Centre for Quality Assessment in Higher Education, as amended on 11 November 2011. The Review Visit to HEI was conducted by the team on 28 April 2015.

- 1. Dr Christiana Rosenberg-Ahlhaus (team leader)**, *lecturer and researcher at the Department of Sports Science and Physical Education of the University of Konstanz (Universität Konstanz), Germany.*
- 2. Prof. Dr Francisco Carreiro da Costa**, *professor at the Faculty of Physical Education and Sport of Lusophone University of Humanities and Technologies (Universidade Lusófona de Humanidades e Tecnologias), Portugal.*
- 3. Dr Frances Murphy**, *Senior Lecturer in Education (Physical Education) at St Patrick's College Dublin, Ireland.*
- 4. Dr Dalia Lapėnienė**, *head teacher of Kaunas Jonas and Petras Vileišiai Lower Secondary School, lecturer at Lithuanian Sports University, Lithuania.*
- 5. Ms Olga Stremauskaitė**, *undergraduate student in Psychology at Vilnius University, Lithuania.*

## II. PROGRAMME ANALYSIS

Health Education (specialisations: Public Health Education, Movement Correction Education) is implemented at the Faculty of Social Welfare and Disability Studies of the University. This was the first faculty in Lithuania to implement first cycle Health Education studies in 2005.

The programme was evaluated in 2009 and given full accreditation. At that point the Review Team described the study programme as a robust programme from a theoretical point of view and reported that it complied with the number of credits required as well as the other requirements of undergraduate study programmes. Strengths of the programme in 2009 were identified as: a theoretically consistent curriculum; students having opportunity for choice within modules; staff as very enthusiastic and highly qualified; a focus on self-study; students' participation in research; provision of sufficient learning resources; close links to community and social partners; participation by both staff and students in Erasmus programmes. Areas for improvement were identified as the excessive teaching workloads; facilities; research funding; international links and publications; insufficient technical staff and availability of literature in foreign languages.

The SER (outlined in 1.3) was provided to the Review Team and informed this report. This report has two main aims: (a) to evaluate the success of the programme in meeting the academic and legal requirements, and (b) to examine the implementation of the recommendations suggested in the 2009 evaluation.

### **2.1. Programme aims and learning outcomes**

According to the SER (para 12, p.6) the purpose of the programme is to '*educate professionals for work (at educational institutions, NGO's, public health offices, wellness centres, communities), who having mastered knowledge and skills necessary for the health teachers, will organize health education, advise and coordinate activities, meeting learners' health enhancement and health education needs, developing personal, group and community powers, and who will pursue the increase in efficacy and availability of health enhancement and health education*'. The *purpose* of the programme as outlined in this statement is not sufficiently clear particularly in light of the outcomes of discussions with students and social partners undertaken as part of the evaluation visit. It is unclear to what extent graduates can 'deliver' in health education in the context of educational institutions in particular where they cannot teach a school subject. National Curricula for primary and secondary education do not make provision for health education as a separate school subject. Public Health specialists who hold degrees in

biomedical science provide public health education. In order to teach any other subject teachers have to hold a degree in that subject and have a teaching qualification. Graduates of this Health Education programme will have a degree in Education studies and a teaching qualification but will not have a degree in a subject area taught at schools. They can, however, teach in the context of non-formal education. Hence the Review Team recommends that this situation is made clear in the purposes and aims of the course. The changes to the programme (the inclusion of the teaching qualification) are not reflected in the officially available information including the State Register. The Team recommends that this information should be made available in all official documentation.

The programme aim is stated as *‘to educate highly qualified professionals of health education, who will ensure the learner’s health and its enhancement as well as his/her right to favourable health environment using continuously updated subject knowledge, cooperating and advising participants of the education process, following value approaches of health, this way improving health and efficacy of health education’*. Firstly, to *‘ensure the learner’s health’* seems to be a very ambitious aim for an undergraduate programme. Enhancement of health may be a more realistic goal. Secondly, a phrase within the overarching aim is *‘following value approaches of health’*. Both aspects of the statement of aims need to be clarified further although some difficulty might be linked to its translation into English. The Review Team suggest that it would be useful to state the overarching aim in more simple terms where the emphasis is on encapsulating the focus of the programme more clearly: the educational aspect and the emphasis on the various therapies.

In order to clarify the purpose **and** aim of the programme it is recommended that reflection on the profile of the undergraduate that the programme wishes to prepare needs to be undertaken. This profile is not clear in the aims and in turn the learning outcomes require further consideration in light of this clarification, although the learning outcomes themselves are clearly stated. If the aim of the programme is to enhance provision of health education leading towards enhanced health for individuals and community this needs to be stated explicitly. The lack of clarity in the definition of the aims of the programme may be further complicated by the English translation where the expression of the aim is difficult to understand.

Furthermore after discussion with the staff, the students and the social partners it is difficult to understand how the education component of this programme ‘fits’ with the social needs of the job market. As health education is not a school subject in Lithuania the graduates of this

programme are not qualified to teach a school subject. The programme description needs to state explicitly why the education component is included and what is the 'added benefit' of the education component. It is recommended that given the majority of students reported that their placements were in schools that their role in such contexts be described clearly within the programme documentation internally within the University and externally in any public documentation and that this description should inform a clearly stated programme aim and a description of the purpose of the programme.

The 2009 Evaluation recommended that the goals and objectives should be contextualised and described in terms of competences. The competences are clearly stated in the SER report (table 2 p. 7-9). The intended learning outcomes are organized into five major groups (SER p. 7-9). It is particularly noteworthy that the distinction between outcomes of the specialisations and general programme outcomes is clearly made. The outcomes are presented in a clear format and are presented consistently. Further review of content to match learning outcomes is necessary particularly with reference to the placements of the students (this will be further developed in paragraph 2.2 below).

The SER provides detail on how the outcomes are communicated and made publicly available (p. 9-10) on official websites of institutions: the Open Information, Counselling and Guidance System AIKOS for example and on the Faculty of Social Welfare and Disability Studies webpage. The relevance of the programme for meeting public needs is particularly strongly made in SER, p. 10, para 19 where some research on children's health is presented. A further statement (para 17) outlines where the programme outcomes meet the Teacher Training Regulations. This is particularly significant in an Education Studies degree. The learning outcomes correspond to the recommendations for first cycle university studies indicating content within study modules ranging from those related to the general university study subjects, the study field subjects and the specialisation subjects. The name of the programme, its learning outcomes, content and qualifications are compatible with each other. However, the education component of the qualification as described earlier needs to be clarified in relation to the context of schools.

## ***2.2. Curriculum design***

From examination of the SER (Table 3, p. 12, 13) and of the description of the study subjects it is clear that the content meets the legal requirements for programmes at first cycle level. Curriculum design is linked appropriately to learning outcomes and generally the content and



methods of the subjects are appropriate for the achievement of the intended learning outcomes. The SER (p.15) provides a detailed outline of the arrangements of subjects in hierarchical order and provides good examples of courses that build on the subject and content knowledge of earlier courses. The distinction between the timetabling of curriculum for full-time and part-time students is clear (SER, Annex 7). The SER Table 3 (p.12, 13) provides a very solid overview of the key components of the study programme: the general subjects of university status, the pedagogical studies and the specialisation. The addition of the two specializations is clearly outlined. During the Evaluation Visit it was found that the programme team have taken steps to restructure the programme so that it includes a minor programme (60 ECTS) so that it meets the Teachers Training Regulations. This change is illustrated in the outline of content. The system for full-time studies is well illustrated based on balancing contact work, practices and self-studying. Following the evaluation visit it is clear that students are supported during the self-study periods through regular contact with lecturers where requested for example.

The study subjects are well arranged with general university courses and pedagogical studies leading on to courses that deepen knowledge and lead from there to specialization. It is laudable too that students have options at this level of specialization. Given the possible employment contexts following graduation consideration by the programme team of some more content related to physical activity would be appropriate as just one module has this as its focus. This is an area that is recognised internationally as key to the work of health educators and considerable literature is available to support deeper study of the area. General placements are spread over the eight semesters of the full-time programme and it is good to see the observational practical placement in semester 1 providing an early 'view' of the work of a professional to students. A further placement with a health educator where students are required to plan and teach lessons is clearly described. However, the focus of the other placements seems somewhat unclear. The nature and contexts of the placements should be clarified in the outline of the study programme. For example, from the Evaluation visit it was clear that students were placed in the Hippotherapy Centre.

The courses (described in Annex 1) are consistently presented with the summary section providing considerable detail on each course. Description of the course B680/B134 Non-traditional Methods of Therapy requires clarification and providing detail on which particular therapies are taught. The aim of the course suggests 'to master non-traditional methods of therapy'. This seems to be an ambitious aim for a module of this duration (3 ECTS). The hippotherapy emphasis is a unique focus within an undergraduate programme and is particularly

appropriate for inclusion given the feedback from the social partner who supplemented the rationale for its inclusion.

It is difficult to ascertain to what extent students are enabled to use Information Technology across the study programme. While there is an Information Management course it is difficult to pin point to what extent students are enabled to use software programmes to communicate across other courses or if they have examined the use of particular pedagogies such as visual pedagogy for example given the growing emphasis internationally on examining the physical and social worlds of individuals, relating it to this programme with a health focus. Nevertheless, it was clear from the study visit that the use of technologies in particular reflect the latest achievements in the field complementing the clear evidence that the staff were teaching content that reflects the latest achievements in science. The specialized work in the area of movement correction and the data being gathered as part of the large scale study of school children are examples of such work. (The reference to 'art' in the evaluation criteria is not particularly relevant to this programme).

The scope of the programme is aligned with the learning outcomes, it is sufficiently broad to correspond with first cycle studies offering a range of relevant general subjects, appropriate subjects related to the study field and the option of two specializations. The learning outcomes for each course are clearly stated and consistent with the overall learning outcomes. With reference to the curriculum design of the programme it was important for the Evaluation Team to reflect back on the 2009 Evaluation Report which recommended more lectures from foreign teachers and use of more literature from abroad. As a result of the evaluation visit it is clear that a genuine effort has been made to provide more reading material in English for example in the library. This additional material clearly relates to the content outlined in the design of the programme. The challenge now is to highlight this work to students and to develop a departmental focus on promoting reading of this material by students. In turn this material should become more evident in the thesis that they present in the final year. This international dimension will be referred to further in sections 2.3, 2.4 and 2.5 below.

### ***2.3. Teaching staff***

The SER document reports that 28 staff contributed to the Health Education study programme. It indicates that it is taught by 10 associate professors and professors. It is acknowledged that this constitutes about 40% of the total teaching staff. However, others implementing the programme are PhD holders or students or specialist practitioners. The average age of staff is 44. The total contact hours (3518) taught by this team of staff indicates that the teaching workload amounts to

approx. 125 hours per team member annually which is reported within the SER as meeting legal requirements. Qualifications of staff with a background in teaching and current work with kindergartens and schools are particularly important elements for the programme team given the new focus on the teacher qualification. The teachers of the pedagogical study field in the Health Education first cycle study programme who have scientific degrees represent more than half of all teachers working in this programme (55 percent) i.e. it proves the compliance of the staff with the legal requirements. This would seem to indicate that the number of teaching staff is adequate to ensure learning outcomes and in addition the staff turnover does not impede programme quality. Hence the study programme is provided by staff meeting legal requirements. The number and qualifications of teaching staff is sufficient to ensure learning outcomes.

Provision for professional development is well described. According to the SER (para. 66 p.21) there are plans to develop contacts with further foreign higher education institutes. There is evidence of many publications in scientific journals directly related to the focus of the programme under review: health education. While the emphasis is on publications in Lithuania there are some significant examples of publications in international journals. This is acknowledged by the SER as an area for improvement: this focus should remain a priority. Many members of the team have engaged in mobility/exchange programmes in Denmark and in the US for example. These initiatives should be encouraged for many reasons but especially because they will enhance language competency and provide platforms for publication in other languages. The output in terms of publications needs to be monitored constantly to ensure that members of staff are targeting international publications within the constraints of having to teach a study programme that requires many contact hours. Having undertaken the evaluation visit and seen first-hand the commitment and motivation of the staff, it is recommended that opportunities for professional development of the teaching staff continue to be a priority for the Department.

#### ***2.4. Facilities and learning resources***

Facilities and resources are satisfactory both in terms of size and quality and appeared very well maintained. Students reported consistently that they were very satisfied with their study and programme facilities. The SER reports that there are 'excellent study facilities' for students. This became very apparent during the evaluation visit. There is sufficient teaching space with some very appropriate spaces to facilitate group work for example. The enhanced library facilities are noteworthy with study spaces and reading spaces that are well defined. Access to journals is satisfactory, with access to 39 widely used databases provided by EBSCO, although a challenge for staff is to prompt students to source and read such material. As referred to in section 2.2.

earlier efforts to stock the library with further material in languages other than Lithuanian need to be sustained. Students did not appear to be regular users of this material. The library itself is a very fine example of a modern facility that the University can showcase to incoming students at undergraduate level. It is noteworthy too that it can be accessed by the community of Siauliai. Teaching staff have ample space for both individual work and work with students.

Satisfactory research conditions to conduct laboratory work for the study programme were evident with investment in specialist equipment, (for example equipment that was used to support work in examination of posture of school going children) that appeared to match staff expertise and interests as well as the demands on the university to undertake particular research from outside bodies. It is clear that students welcome the practical work that they undertake in the laboratories. The SER (p.23) indicates that staff wish to improve cooperation with social partners to create further conditions for students' practical activities with an emphasis on linking with outside institutions of social partners. This appears to be a very good focus for departmental work and in line with the kind of work that students reported they value during the evaluation visit. Possible areas for investigation by students would be best identified by the programme team in collaboration with students and social partners while taking resources and facilities into consideration.

### ***2.5. Study process and students' performance assessment***

The entry requirements in the programme are well explained. The number of students entering the full-time and part-time modes has been decreasing slightly. While the smaller number of students admitted appears to be well explained it is not clear if the department has worked on a strategy to attract more students. Graduation efficiency appears to be in keeping with other programmes although a cause of concern may be the attraction of 'foreign higher educational institutions' (SER p.25) for school graduates. While the SER (para 88 p.26) suggests that school graduates are 'well aware of the purpose of the specialty' and acknowledging that the tendency to attend foreign higher educational institutions may be linked to external factors, it would be important for the Faculty and programme team to ensure that they devote increased time and energy to promotion of this programme to school graduates. Self-study time accounts for 65% of the full-time studies and 82% of the part-time studies (SER Table 8, p. 26). Students are encouraged to complete authentic, personal reports and checks are in place to avoid plagiarism.

Regarding completion of Bachelor theses there is an awareness of enhancing conceptual skills of students and an emphasis has been placed on deepening research abilities. The list of students'

final theses is provided and a sample of theses was reviewed as part of the evaluation visit. They appear to encompass a wide range of topics. However, two issues merit particular comment: theses examined lacked a discussion section and did not make use of sufficient literature in languages other than Lithuanian. While the presentation of theses' findings appeared very clear it is important that students undertake some analysis of findings and report this in a discussion section acknowledging that this discussion will be limited by the scope of bachelor. Secondly, students should be encouraged to draw on more literature in English and/or other languages. The opportunity for students to present research at university organised conferences is a laudable aspect of the programme. The instance of students on an organising committee is a further positive sign of active student involvement. There are reports too of students doing volunteer work at summer camps indicating strong community links from the programme of study. It is interesting that the SER indicates that the faculty is seeking to allocate assessment grades to encourage students to undertake voluntary work. Overall, there is a positive attitude to encouraging students to participate in research activities given the first level status of this programme.

With regard to employability of graduates, while 225 graduates completed studies over the five-year period just 42% work according to their speciality. However, 12% continue their studies. There is some data available on where they work e.g. health care institutions, nursing homes etc. This data should inform the discussion recommended in 2.1 above related to the work placements of the undergraduates with a focus on how the study programme can enhance employment opportunities in relevant areas. It is important that the issue of the professional activities of the majority of graduates meeting the expectations of the providers is revisited. Linked to the points made in 2.1 above it is unclear if the programme aim and purpose is stated sufficiently clearly to evaluate if the specialty is in fact clearly matched to employment opportunities.

There appears to be a wide variety of assessments providing opportunities to meet many learning outcomes. Presentations, examinations, defence of laboratory work, case analysis and journals are just some of the modes of assessment. The course descriptions provide very clear detail on the assessment of the courses. The criteria for assessment seems to be communicated clearly to students under the University Study Regulations (SER, p.33), students have opportunities to consult on study issues and to repeat subjects and retake exams including defence of the Bachelor thesis. The process of defending the thesis is well described. In addition, the

organisation of the study process appears to be well matched to achievement of learning outcomes.

Student mobility data presented in the SER (Table 11, p.30) indicates that a good number of students are travelling to other countries although the figure for 2014 (3) is the lowest for the period cited. In contrast, the number of incoming students reached its highest rate in 2012/2013 when 7 students visited. This could indicate that the programme is gaining a good international image as suggested in the SER (p.30).

Academic and social support is available to students and detail is provided on funding that is available to them. From discussion with students and alumni it seems that very good relationships have been formed between students and staff. Indeed students reported that members of staff were always willing to support them using a variety of means of communication and at times that were mutually convenient. The evaluation visit provided evidence of the importance of this support for students.

## ***2.6. Programme management***

Roles of faculty are clearly described with a particular emphasis on the shared responsibility for quality. Internal processes for quality assurance are very well described. In particular, the work of the Study Programme Committee is clearly described and its work is reported to the head of the department. Two student representatives sit on the Study Programme Committee. Student feedback although at times difficult to collate (in questionnaire format for example) is sought. It is noteworthy that each year teachers carry out self-assessment of their activities and submit their reports to the head of department. They interview students to obtain feedback and students' claims and proposals as well as social partners' opinions and comments and discussed at the meetings of the Study Programme Committee. Roundtable discussions and some conferences are organised by the department. While the SER reports that the health education programme was reported more favourably than programmes at other faculties it is acknowledged that collection of a sufficient research sample is problematic. This is a challenge that should be re-visited by the department to ensure that data collected will meaningfully re-shape aspects of a department's work. The data system contains data about the programme including data about scientific publications. The Alumni system is described and it is clear that alumni and social partners have strong relationships with the programme. Discussion with the alumni and social partners during the evaluation visit appeared to indicate that they were positive about their work with the programme. The SER (p. 33) signals that there is ongoing work to monitor and maintain

feedback with graduates. This is a welcome development and should enhance the programme, ensuring that feedback informs practice in a more systematic way. A similar exercise conducted with social partners could ensure that feedback from them would be treated in the same way.

Following on the evaluation visit the Review Team discussed the ongoing importance of members of the department meeting at micro-level and ensuring that all members of staff teaching on the programme understand fully how their course links to other elements of the programme. There is some evidence of this practice contained in the SER underpinned by the discussion on quality. However, following on these meetings it is recommended that discussion should take place between the Department responsible for this programme and other relevant departments to explore the possibility of further shared teaching and sharing of facilities where relevant. It was not clear from the evaluation visit that such links exist. A further aspect worth exploring would be the possibility of sharing the expertise of visiting staff where contributions may be relevant to different programmes. It is best that departments identify common areas of interest but it would seem reasonable that, for example, some topics within health education would be important to those working in programmes related to physical education also.

In conclusion, it is clear that the internal quality assurance measures described are comprehensive, effective and efficient at university, faculty and department level. Most importantly, there appears to be ongoing continuous, systematic improvement of the programme (SER, p. 40) based on the results of internal and external assessments. The challenge for the department is to find ways of encouraging stakeholders within the programme to provide the feedback that is necessary for meaningful programme evaluation.

### **III. RECOMMENDATIONS**

1. The aim of the programme needs to be clearly stated with careful consideration of the language used to ensure that (a) clarity of purpose is communicated (b) the scope of the programme is clear and (c) the programme focus is clear in all contexts. The learning outcomes need to be examined in light of the placement and employment opportunities that are provided. It is important to be explicit about the education component of the programme indicating its relationship to Education Studies.
2. The programme has been restructured to include a minor programme in Teacher Training. This should be reflected in all official public information.
3. The nature and contexts of the placements that constitute a significant part of this programme should be clarified and described in the outline of the study programme.
5. The description of the course B680/B134 (Non-traditional Methods of Therapy) needs to be clarified and described in some more detail given the multiple understandings of 'non-traditional'.
6. The final theses should emphasise discussion of the findings. The discussion should promote deeper analysis of the findings of the study. This should be included in the success criteria described to students.
7. Further emphasis should be placed on development of an internationalisation strategy ranging from inviting international contributions to the programme, publishing research in languages other than Lithuanian and promoting further the reading of literature by students in languages other than Lithuanian.
8. Further links should be developed between departments highlighting the shared areas of interest and promoting best use of resources.



## **IV. SUMMARY**

Health Education is a first cycle study programme implemented by the Department of Health Studies of the Faculty of Social Welfare and Disability Studies at Siauliai University. Since the evaluation in 2009 the programme has been enhanced and continues to build on its strengths.

### **Strengths:**

It is particularly noteworthy that the distinction between learning outcomes of the specialisations and general programme learning outcomes is clearly made. The learning outcomes are presented consistently. A very solid overview of the key components of the study programme: the general subjects of university status, the pedagogical studies and the specialisation is provided. The two specialisations (Public Health Education and 'Movement Correction Education') offer significant choice to students.

The teaching staff is highly committed to the work of the programme and the self-evaluation report is a comprehensive account of their work including the challenges that they face. Students report that members of staff are very supportive of their work. Study facilities are good allowing students to engage in independent work, group work and meetings with staff in appropriate environments: library, workspaces, meeting rooms etc. Assessment of students in different subjects of the programme is appropriate, varied and corresponds with first cycle studies. Programme management is very well structured and appears to work very well in its implementation.

### **Weaknesses:**

The programme aims and purposes do not make explicit the fact that graduates of this Health Education programme will have a degree in Education studies and a teaching qualification but will not have a degree in a subject area taught at schools. They can, however, teach in the context of non-formal education. Hence the aims do not reflect the work context strongly enough where graduates can teach in a non-formal education context.

The purpose of the work placements in educational institutions are not clearly stated and linked to the aim and purposes of the programme. Teaching practices with strong international links are not embedded to a significant extent in the programme. Engagement of students with literature in languages other than Lithuanian is limited. Final year theses do not contain meaningful discussion of findings.

## V. GENERAL ASSESSMENT

The study programme *Health Education* (state code – 612X20002) at Siauliai University is given **positive** evaluation.

*Study programme assessment in points by evaluation areas.*

No.	Evaluation Area	Evaluation of an area in points*
1.	Programme aims and learning outcomes	3
2.	Curriculum design	3
3.	Teaching staff	3
4.	Facilities and learning resources	4
5.	Study process and students' performance assessment	3
6.	Programme management	3
	<b>Total:</b>	<b>19</b>

\*1 (unsatisfactory) - there are essential shortcomings that must be eliminated;

2 (satisfactory) - meets the established minimum requirements, needs improvement;

3 (good) - the field develops systematically, has distinctive features;

4 (very good) - the field is exceptionally good.

Grupės vadovas: Team leader:	Dr Christiana Rosenberg-Ahlhaus
Grupės nariai: Team members:	Prof. Dr Francisco Carreiro da Costa
	Dr Frances Murphy
	Dr Dalia Lapėnienė
	Ms Olga Stremauskaitė

**ŠIAULIŲ UNIVERSITETO PIRMOSIOS PAKOPOS STUDIJŲ PROGRAMOS  
SVEIKATOS EDUKOLOGIJA (VALSTYBINIS KODAS – 612X20002) 2015-06-19  
EKSPERTINIO VERTINIMO IŠVADŲ NR. SV4-160 IŠRAŠAS**

&lt;...&gt;

**V. APIBENDRINAMASIS ĮVERTINIMAS**

Šiaulių universiteto studijų programa *Sveikatos edukologija* (valstybinis kodas – 612X20002) vertinama **teigiamai**.

<b>Eil. Nr.</b>	<b>Vertinimo sritis</b>	<b>Srities įvertinimas, balais*</b>
1.	Programos tikslai ir numatomi studijų rezultatai	3
2.	Programos sandara	3
3.	Personalas	3
4.	Materialieji ištekliai	4
5.	Studijų eiga ir jos vertinimas	3
6.	Programos vadyba	3
	<b>Iš viso:</b>	<b>19</b>

\* 1 - Nepatenkinamai (yra esminių trūkumų, kuriuos būtina pašalinti)

2 - Patenkinamai (tenkina minimalius reikalavimus, reikia tobulinti)

3 - Gerai (sistemiškai plėtojama sritis, turi savitų bruožų)

4 - Labai gerai (sritis yra išskirtinė)

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**IV. SANTRAUKA**

Studijų programa *Sveikatos edukologija* yra pirmosios pakopos (bakaluro) programa, vykdoma Šiaulių universiteto Socialinės gerovės ir negalės studijų fakulteto Sveikatos studijų katedroje. Nuo 2009 m., kai buvo atliktas šios programos vertinimas, ji sustiprinta ir toliau plėtojama remiantis stiprybėmis.

**Stiprybės:**

Ypač pažymėtina tai, kad aiškiai atskirti specializacijų ir bendrosios programos numatomi studijų rezultatai. Numatomi studijų rezultatai pateikti nuosekliai. Labai išsamiai apžvelgtos pagrindinės studijų programos dalys: bendrieji universitetiniai dalykai, pedagoginės studijos ir

suteikiama specializacija. Dvi specializacijos (Visuomenės sveikatos ugdymas, Fizinio aktyvumo ugdymas) užtikrina studentams svarbią pasirinkimo galimybę.

Šios programos dėstytojai labai atsidavę darbui; jie pateikia savianalizės suvestinę – išsamią savo darbo ataskaitą, apimančią ir problemas, su kuriomis susiduria. Studentai praneša, kad dėstytojai jiems labai padeda. Studijoms skirtos priemonės geros, užtikrina studentams galimybę dirbti savarankiškai, grupėmis ir susitikti su dėstytojais tinkamoje aplinkoje: bibliotekoje, darbo kabinetuose, susirinkimų patalpose ir t. t. Studentų įvairių dalykų žinios vertinamos tinkamai, įvairiai ir atitinka pirmosios pakopos studijų vertinimo reikalavimus. Programos vadyba labai gerai struktūrizuota ir, atrodo, veiksmingai įgyvendinama.

### **Silpnybės:**

Programos tikslai ir rezultatai nerodo, kad studijų programos *Sveikatos edukologija* absolventai įgis edukologijos bakalauro laipsnį ir pedagogo kvalifikaciją, bet neturės laipsnio tų dalykų, kurių mokoma mokykloje. Vis dėlto jie gali mokytis neformaliojo ugdymo įstaigose. Taigi programos tikslai, palyginti su darbo rinkos kontekstu, nepakankamai gerai atspindi, kokiose vietose neformaliojo švietimo srityje absolventai galės dirbti pedagoginį darbą.

Praktikos atlikimo mokymo institucijose tikslas nėra aiškiai nurodytas ir susietas su programos tikslais ir rezultatais. Šiai programai nebūdinga stipri tarptautinė mokymo praktika. Studentai mažai naudojami literatūra užsienio kalba. Baigiamuosiuose darbuose nėra prasmingai aptariami rezultatai.

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### **III. REKOMENDACIJOS**

1. Programos tikslą reikia nurodyti aiškiai, atkreipiant dėmesį į vartojamą kalbą, ir užtikrinti, kad
  - a) tikslas būtų pateiktas aiškiai, b) būtų aiški programos apimtis ir c) visuose kontekstuose būtų aišku, į ką ši programa orientuota. Numatomus studijų rezultatus reikia patikrinti atsižvelgiant į suteikiamas praktikos ir įdarbinimo galimybes. Svarbu aiškiai nusakyti programos edukologinį komponentą, nurodant programos santykį su edukologijos studijomis.

2. Programa pertvarkyta siekiant įtraukti į ją gretutines pedagogikos studijas. Tai turi atsispindėti visoje oficialioje viešojoje informacijoje.
3. Reikėtų paaiškinti ir studijų programos apraše apibūdinti praktikos, kuri yra svarbi šios programos dalis, pobūdį ir turinį.
5. Reikia paaiškinti dalyko B680/B134 (Netradiciniai terapijos metodai) aprašą ir apibūdinti jį išsamiau, nes žodis „netradicinis“ suprantamas įvairiai.
6. Baigiamuosiuose darbuose reikėtų akcentuoti išvadų aptarimą. Šis aptarimas turėtų užtikrinti gilesnę tyrimo išvadų analizę. Tai reikėtų įtraukti į apibūdinamus studentų sėkmės kriterijus.
7. Reikėtų ir toliau skirti daug dėmesio tarptautiškumo strategijos, apimančios užsienio dėstytojų kvietimą, mokslinių tyrimų skelbimą ne tik lietuvių, bet ir kitomis kalbomis ir tolesnį studentų raginimą skaityti literatūrą užsienio kalbomis, plėtojimui.
8. Turėtų būti toliau stiprinami ryšiai tarp katedrų, išryškinant bendro intereso sritis ir skatinant kuo geriau pasinaudoti ištekliais.

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Paslaugos teikėjas patvirtina, jog yra susipažinęs su Lietuvos Respublikos baudžiamojo kodekso 235 straipsnio, numatančio atsakomybę už melagingą ar žinomai neteisingai atliktą vertimą, reikalavimais.

Vertėjos rekvizitai (vardas, pavardė, parašas)